MENTAL HEALTH AND DISABILITY SERVICES COMMISSION

July 21, 2016 - 9:30 am to 3:00 pm Polk County River Place, Room 1 2309 Euclid Ave, Des Moines, Iowa MEETING MINUTES

MHDS COMMISSION MEMBERS PRESENT:

Thomas Bouska
Brett McLain
John Parmeter
Jody Eaton
Lynn Grobe
Representative David Heaton
Kathryn Johnson
Brett McLain
John Parmeter
Rebecca Peterson
Patrick Schmitz
Marilyn Seemann
Jennifer Sheehan

Sharon Lambert (phone)

MHDS COMMISSION MEMBERS ABSENT:

Senator Mark Costello Senator Liz Mathis

Marsha Edgington Representative Scott Ourth

Betty King Michael Polich
Geoff Lauer Rebecca Schmit0.z

OTHER ATTENDEES:

Kris Bell Iowa Senate Democrats Caucus Staff

Teresa Bomhoff NAMI Greater Des Moines

Connie Fanselow DHS, MHDS, Bureau of Community Services and Planning

Zeke Furlong Iowa House Democrats Caucus Staff

Jan Heikes DHS, MHDS, Bureau of Community Services and Planning

Linda Kellen Department of Inspections and Appeals

Dawn Mentzer CEO, Rolling Hills MHDS Region

Peter Schumacher MHDS, Community Services & Planning/CDD

Rick Shults Division Administrator, MHDS, Department of Human Services

DJ Swope Iowa Department on Aging

Welcome and Call to Order

Patrick Schmitz called the meeting to order at 9:47 am and led introductions. Quorum was established with eleven members present and one participating by phone. No conflicts of interest were identified.

Approval of Minutes

Tom Broeker made a motion to approve the June 16 and July 6 minutes as presented. Kathy Johnson seconded. The motion passed unanimously.

Rolling Hills Policy and Procedure Manual Amendment – Dawn Mentzer and Jan Heikes Dawn Mentzer said that the Rolling Hills MHDS Region had been working towards more community integration for people with disabilities for the last two years. This included employment and living situations. Dawn said Rolling Hills have been working with community

partners, and went through a Request for Proposal (RFP) process to award grants to providers of integrated employment services. Currently, the region is investing approximately \$500,000 towards supported employment grants in the region. Dawn said the region is no longer support funding work activity services as of July 1, 2016, and are asking the Commission to approve an amendment to their Policies and Procedures Manual.

Geoff Lauer asked how the individuals being effected are handling the transition. Dawn said they had not received any negative feedback. She said they were very thoughtful in how they made the transition and worked with a number of stakeholders to plan ahead and make the transition with their input.

Kathy Johnson said it was nice to see systems change and asked what type of support will continue for the providers. Dawn answered that there will be financial support, bi-monthly meetings, and training to share resources and techniques to provide more opportunities.

Sharon asked what barriers Dawn had seen to individuals finding placement in jobs. Dawn answered that transportation is a barrier. To address this, Dawn said the region is purchasing a vehicle for a rural area in the region to help get individuals to their jobs.

Geoff Lauer made a motion to recommend the Department accept the amendment. Tom Bouska seconded the motion. The motion passed unanimously.

Representative Heaton congratulated Dawn on making the change to modernize employment services in their region.

Administrative Rules Regarding Mental Health Advocates – Jan Heikes and Rick Shults Rick Shults said that a rules package was adopted by the Commission and went into effect on July first, but one section of those rules regarding data collection was delayed due to concerns over timing and cost to the counties. Rick said the Department has worked with members of the Commission, the Iowa State Association of Counties (ISAC), and Mental Health Advocates to address these concerns. Rick said he came to ask for approval to notice the amended section of the rules, which would bring them into effect in early 2017.

Kathy Johnson asked if there were changes in the type of data that would be collected. Rick answered that the amendment would ask for aggregate data rather than individual-level data.

Geoff Lauer asked if the amended rule would allow the collection of data on diagnoses. Rick answered that the data would available but not compiled. Geoff asked if the data is stored in a central location or if the Department would need to request it. Rick said the Department would have to make a request to see the data.

Rick said that there is extensive data being collected, compiled, and reported by the MHDS Regions, and this rule only pertains to Mental Health Advocates.

Patrick asked if there was a way to match the data required by this rule to the MHDS Region data that is currently being reported. Rick answered that the Department would be able to make some comparisons, but in response to the concerns raised by Mental Health Advocates and the Administrative Rules Review Committee (ARRC), the amended rule would not require data to include unique identifiers.

John Parmeter expressed concern that the data requested under the amended rule could not be used to answer specific questions as well as individual-level data. Rick Shults said that MHDS Regions would still submit extensive and detailed de-identified data on the MHDS system as a whole.

There was discussion regarding the involuntary commitment process and the improvement of the state's mental health system.

John Parmeter noted that in previous discussions, one of ARRC's concerns was the cost to the counties, and that his recollection was that the cost would be approximately \$10,000 per year. He asked if this is still the case. Jan Heikes answered that the estimate was that it would cost approximately \$10,000 to make the necessary changes to the data-reporting system, but the increase in ongoing costs was not known. Jody Eaton said that the Department would still receive detailed information from MHDS Regions on the commitment process such as transport and other services around commitments for which Regions pay.

Geoff Lauer asked Jody Eaton if the Regions were interested in the data set in the rules that had been delayed rather than the amended rule. Jody answered that her impression was that the data could be rolled into the data Regions already report to the Department.

Geoff Lauer asked Representative Heaton if the data requested be useful to assessing individuals' needs within the mental health system, and if he was concerned with the amended data. Representative Heaton said he had heard estimates, but had never seen actual data on this portion of the system. Geoff said he thought the original data requested would be more useful than the amended section.

Geoff Lauer asked Rick Shults if it would be possible to receive similar information directly from hospitals. Rick said the Department had had luck working with hospitals in the past on voluntary reporting such as with the inpatient psychiatric bed-tracking system.

Jen Sheehan said that it would be possible to combine the data reported under the amended rule with data collected from hospitals, but expressed concern that hospitals would be concerned with the allocation of staff time to voluntary reporting.

Patrick noted that these rules do not place any requirements on the hospitals, and only pertain to Mental Health Advocates and the counties that employ them. Patrick noted that there has been a Mental Health Advocate who has been outspoken with concerns about these rules.

Jody Eaton asked how the Department planned to use the information they would receive from Mental Health Advocates. Rick Shults answered that they would be able to learn about frequency and numbers in different areas of the state. The Department would also be able to learn about workload as it is currently inconsistent across the state.

Rebecca Peterson said the amended section would not allow the Department to see how many repeat commitments had been made, and would appreciate seeing more specific information being collected.

Rick Shults said that the ARRC had not heard from the Commission on their position on the data collection section of these rules. John Parmeter agreed, and expressed an interest in speaking with the ARRC about these rules.

Geoff Lauer made a motion to reject the amended section of the rules. John Parmeter seconded the motion. The vote to reject the amended rule passed with Tom Bouska voting nay.

Administrative Rules Regarding the Autism Support Program

Connie Fanselow said the General Assembly made some changes to the Autism Support Program (ASP) in code, and that the Department is making corresponding changes in administrative rules. Connie said she met with a committee of Commission members to go over the proposed changes.

Connie presented the Notice of Intended Action.

Rick noted that the eligibility determination works in a way that is very similar to Medicaid.

Geoff Lauer asked if the administrator of the program refers to the Medicaid Managed Care Organizations (MCO). Connie answered that it does.

Rebecca Peterson asked if the MCOs are currently administering the program. Connie answered that it had been administered by Magellan, but since January, 2016, the Department has been doing all of the administration for the program. The plan is to transition the administration to the MCOs once these rules are effective.

Jen Sheehan asked if someone had private insurance coverage, would they be assigned to a Medicaid MCO. Connie answered that the Department would ask the family to choose an MCO for this program. There will also be a point of contact within the MCO for this program specifically to avoid confusion with the Medicaid system.

Tom Bouska asked how the cost-sharing portion will be paid. Connie answered that the cost-share will be paid directly to the provider.

Tom Bouska asked how the program would be handled for populations that are excluded from the Medicaid MCOs such as American Indians. Connie answered that since this is not a Medicaid program, the exclusions do not apply and that they would be placed with an MCO for ASP only.

Rebecca Peterson expressed concern with the MCOs being the administrators of this program and said she was worried that individuals in this program may be lost in the shuffle. Rick said that this is an MCO contract and the Department will work with them MCOs to make sure it is successful. Rick noted that these rules require less of the current MCOs than it did of Magellan when they were the administrator. Connie said they are ensuring that there is one contact person for the program at each MCO who will be the point of contact for each family to make sure they get adequate attention.

Kathy Johnson asked if care coordination is required. Connie said that families do not need to utilize care coordination services if they do not want to. Kathy Johnson asked if applicants are given a list of providers. Connie said the Department has a list, but most families have already spoken to a provider, and are looking for help with paying for the services.

John Parmeter made a motion to approve the Notice of Intended Action. Geoff Lauer seconded the motion. The vote passed unanimously.

MHDS Update - Rick Shults

Rick said that many MHDS Regions are expanding core plus services such as jail diversion. Rick mentioned the Stepping Up program which is designed to address the needs of people with mental illness who are involved in the criminal justice system, and are there because of their mental health needs. The program aims to end the cycle of repeated contacts with the judicial system.

Rick said MHDS will be submitting a report to the General Assembly on November 15 on the progress of the MHDS Regions and the status of Mental Health Redesign. The Legislation directed the Department to report on the successes and challenges of the system, as well as sustainable funding.

Rick said the Certified Community Behavioral Health Clinics (CCBHC) have been selected for the planning grant lowa received last year, and they are Heartland Family Services in Council Bluffs, Abbe Center in Cedar Rapids, and Seasons Center in Spencer. The Department will be working with those agencies to prepare for the possibility of the demonstration grant. There were twenty-five states that received the planning grant, and there will be eight states who receive demonstration grants.

The Children's Mental Health and Well-Being Workgroup has reconvened to continue their work and build on last year's recommendations. The final report was well-received by the legislature, and the legislature included a \$300,000 appropriation for planning grants for children's mental health crisis services, an directed the Department to partner with a private foundation on the "Learning Labs" that would study more collaborative efforts in caring for children and families. Rick said the Department is currently developing an RFP for crisis services and it should be released soon, and there will be a similar process for the Learning Labs, but one month later. Rick said one of the projects they are working on is geo-mapping current children's mental health services in the state. Rick thanked Teresa Bomhoff for her help in compiling information for the maps.

Rick said that the contract for the Office of Consumer Affairs had run its maximum term and could not be renewed again without a competitive bid process. The Department has issued a notice of intent to award the contract to NAMI lowa.

Rick noted that the Commission had adopted rules on subacute care facilities at a special meeting held by phone on July 6. Rick said he expected the rules to go into effect on September 7.

Concerns were raised regarding MCO service authorizations. Rick answered that he would look into those concerns.

Public Comment

Teresa Bomhoff said she was not aware that the contract for the Office of Consumer Affairs had been awarded to the state affiliate, NAMI Iowa, and that she is the president of the local affiliate, NAMI Greater Des Moines.

Teresa expressed concern with denial of care and poor reimbursement to providers. Teresa said she is hearing the providers are concerned about their financial security, and that they are taking out lines of credit.

Rick Shults said that there used to be individual rates paid to service providers, which was very administratively cumbersome. The Department worked together with providers to develop a weighted average rate to pay for services that would reduce the administrative burden, and maintain the same total rate of payment. In some cases, rates seemed to go down, and in others it went up. Rick said that sometimes, this is what the Department hears is happening. Rick said that they are also working to make sure that providers are getting reimbursed for services.

Teresa spoke about policy proposals she is working on called the "Jackie Waiver" and the Jackie Skip" which would allow for longer term treatment in a subacute care facility if they need that level of care.

The Commission took a break for lunch at 12:04 pm The Commission resumed at 1:06 pm

Mental Health Block Grant and First Episode of Care – Laura Larkin and Mary Mohrhauser

Laura Larking introduced herself and said she develops the Community Mental Health Services Block Grant application and plan with the help of the Mental Health Planning Council. The plans and applications are available at https://dhs.iowa.gov/mhds-providers/providers-regions/block-grant . Laura said the grant is a formula grant and that every state gets one. This next fiscal year, lowa's grant will be approximately \$4 million with a 10% set-aside for first episode psychosis.

Laura explained that the grant is meant to help adults with serious mental illness (SMI) and children with serious emotional disturbance (SED). Grant funds can be used to pay for services that are not funded by Medicaid or for people who do not receive Medicaid. There are general parameters and guidelines, but within those, providers are able to use funds to meet their needs as they see fit.

Mary Mohrhauser said that from 2010 to 2014, there was a research project called Recovery After an Initial Schizophrenia Episode (RAISE) that examined whether people who suffer an schizophrenic episode recover better and have better long term outcomes than the traditional care system, and how best to implement a team approach. Mary said since lowa had an agency that participated in that research, Eyerly Ball in Des Moines, the state took advantage of the opportunity to utilize extra funding to develop these teams. The research was based on young adults and adolescents, but lowa used a wider age-range. Mary said the Department has learned a lot over the past year. The demand for the services have been higher than anticipated and has grown very quickly.

Laura said that this is a shift to use the block grant funds for early identification and prevention. The research has supported the approach as a way to prevention long term disability and help people return to their lives more completely after an episode.

Kathy Johnson spoke about Assertive Community Treatment (ACT) Teams. She said they have been successful, but by the time people qualify for that level of treatment, they are often treatment resistant. This program is an earlier intervention to prevent people from rising to a harmful level of acuity, and tries to help people as much as possible before an illness disrupts their lives.

John Parmeter asked how referrals are made to services since the entryway is not uniform. Laura said there are a number of ways people could be referred to the se services. Referrals could come from teachers, mental health providers, or others.

Teresa Bomhoff asked what the age range for the First Episode Psychosis programs are. Mary answered that each program chooses its age-range, but nobody is left out.

Representative Heaton asked how people who are eligible for Medicaid are handled with these services. Mary answered that they would receive individual services through their MCOs. Representative Heaton said if this was a successful model, that MCOs would adopt and support this model. Patrick Schmitz said this program could very well be one of the value-added services offered by MCOs.

Representative Heaton said he would like to see First Episode Psychosis services available acorss the state and in every MHDS Region to increase access outside of major urban centers.

Planning for the August Meeting

There was a request to have a discussion on the Helping Families in Mental Health Crisis Act. The Commission planned to vote on approval of a cost increase recommendation letter to the Director at the August meeting.

Public Comment

There was no public comment.

The Commission broke into committees at 1:22 pm

The meeting was adjourned at 2:50 pm.

Minutes respectfully submitted by Peter Schumacher.